

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Dec 03, 2009
Secretary of State**

DOCUMENT# N08000001092

Entity Name: CAPITAL LOFTS AT THE SECURITY BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

117 NE 1ST AVENUE
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

117 NE 1ST AVENUE
MIAMI, FL 33132

New Mailing Address:

2075 N. POWERLINE ROAD
SUITE #6
POMPANO BEACH, FL 33069

FEI Number: 80-0508091 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAIA, CHRISTOPHER H ESQ.
140 NE 2ND AVENUE
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

AMOR, ORLY H
2075 N. POWERLINE ROAD
SUITE #6
POMPANO BEACH, FL 33069 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: OA

12/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EINHORN, HAIM
Address: 117 NE 1ST AVENUE
City-St-Zip: MIAMI, FL 33132

Title: VSD () Delete
Name: EINHORN, ETTAI
Address: 117 NE 1ST AVENUE
City-St-Zip: MIAMI, FL 33132

Title: TD () Delete
Name: BENASSAYAG, CHARLY
Address: 117 NE 1ST AVENUE
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ETTAI EINHORN

VSD

12/03/2009

Electronic Signature of Signing Officer or Director

Date